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# EXHIBIT G

Form DC-135A		Commonwealth of Pennsylvania Department of Corrections	
<b>INMATE'S REQUEST TO STAFF MEMBER</b>		INSTRUCTIONS Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.	
1. To: (Name and Title of Officer) <i>Ms Tice</i>		2. Date: <i>2 1 9 1 2 5</i>	
3. By: (Print Inmate Name and Number) <i>Johnathan Robins JP9849</i>		4. Counselor's Name: <b>Mr. Rigg</b>	
<i>Johnathan Robins</i> Inmate Signature		5. Unit Manager's Name: <b>Mr. Pasquale</b>	
6. Work Assignment:		7. Housing Assignment: <b>H-A</b>	
8. Subject: State your request completely but briefly. Give details. <i>When last I was in the program I was told staff would forward information. That is why I gave Ms Hall the envelope with information. Ms Hall said she gave this information to you. If you are not going to forward the information I would like it back so I could forward the documents to people who care about learning the truth.</i>			
9. Response: (This Section for Staff Response Only) <i>Your information was forwarded to me as SOL Coordinator and I responded to the request attached to the envelope stating we do not forward documents to the SoAB and you could provide that information to them yourself. I was told the information provide was a copy and not original documents therefore it was disposed of appropriately as there wasn't anything provided that would be needed within the program.</i>			
To DC-14 CAR only <input type="checkbox"/>		To DC-14 CAR and DC-15 IRS <input type="checkbox"/>	

STAFF MEMBER NAME

Print

*M. Tice PSS*

Signature

DATE *2/14/25*